

AMENDMENT TRANSMITTAL LETTER				Docket No. 1248-0870PUS1																																					
Application No. 10/578,321-Conf. #5572		Filing Date May 4, 2006		Examiner S. L. Krycinski																																					
Applicant(s): Takenori YOSHIZAWA																																									
Invention: SUBSTRATE CARRYING TRAY																																									
MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450																																									
Transmitted herewith is an amendment in the above-identified application.																																									
The fee has been calculated and is transmitted as shown below.																																									
CLAIMS AS AMENDED																																									
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 15%;">Claims Remaining After Amendment</th> <th style="width: 15%;">Highest Number Previously Paid</th> <th style="width: 15%;">Number Extra Claims Present</th> <th style="width: 15%;">Rate</th> <th style="width: 15%;"></th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>58</td> <td>- 48 =</td> <td>10</td> <td>x 52.00</td> <td>520.00</td> </tr> <tr> <td>Independent Claims</td> <td>2</td> <td>- 3 =</td> <td>0</td> <td>x 220.00</td> <td>0.00</td> </tr> <tr> <td colspan="6" style="border-top: 1px solid black; border-bottom: 1px solid black;">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td> </tr> <tr> <td colspan="6" style="border-bottom: 1px solid black;">Other fee (please specify): Extension for response within first month 130.00</td> </tr> <tr> <td colspan="6" style="border-bottom: 1px solid black; text-align: right;">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 650.00</td> </tr> </tbody> </table>							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	58	- 48 =	10	x 52.00	520.00	Independent Claims	2	- 3 =	0	x 220.00	0.00	Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify): Extension for response within first month 130.00						TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 650.00					
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<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity																																									
<input type="checkbox"/> No additional fee is required for this amendment.																																									
<input checked="" type="checkbox"/> Please charge Deposit Account No. 02-2448 in the amount of \$ 650.00 . A duplicate copy of this sheet is enclosed.																																									
<input type="checkbox"/> A check in the amount of \$ _____ is enclosed.																																									
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																																									
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 02-2448 as described below. A duplicate copy of this sheet is enclosed.																																									
<input checked="" type="checkbox"/> Credit any overpayment.																																									
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.																																									
 #58,755 Michael R. Cammarata Attorney Reg. No.: 39,491 Dated: August 14, 2009																																									
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000																																									